

ELIGIBILITY OF INDIVIDUALS UNDER AGE 21

03/01/02

MA-3230 ELIGIBILITY OF INDIVIDUALS UNDER 21

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IV. POLICY RULES - SPECIAL NEEDS ADOPTION, INDIVIDUAL UNDER AGE 18, M-AF**A. Description**

Children covered under this section must have special medical or rehabilitative needs, which are barriers to adoption. These special needs are the result of medical, mental or emotional conditions that require periodic treatment or therapy. Another factor considered as a special need is the necessity of placing siblings together to maintain a family group. The county foster care or adoption assistance worker makes the determination for special needs of an adoptive child.

Section [VI.B.](#) provides policy for special needs children adopted in North Carolina. Section [VI.C.](#) provides policy for special needs children adopted in another state now living in North Carolina.

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B. North Carolina Special Needs Adoption Assistance Children Living In N.C.

These children qualify for state adoption assistance but are ineligible through Title IV-E because at the time of placement in foster care they are ineligible for or not receiving Work First. There may be other extenuating circumstances at the time of placement that preclude IV-E eligibility. The majority of these children are placed in foster care and receive Medicaid under H-SF category; however, upon adoption would not continue to be Medicaid eligible if the adoptive parents' income and resources were considered. Evaluate these special needs adoptive children under M-AF Categorically needy guidelines counting only the child's income and resources. Do not evaluate children for MAF-M.

1. Special Needs Status

- a. The child must have documented special needs which are barriers to adoption.
- b. The Foster Care or Adoption Assistance worker in the county DSS will make the determination of whether the child has "special needs" based on the criteria outlined in [VI.A.](#) which might prohibit adoption.
- c. If the child receives SSI as a foster child and has been in the custody of DSS or a private agency prior to the adoption, he is considered to have special needs status. SSI children who are independently placed in adoption are not considered to have special needs status.

2. Financial Eligibility Criteria

At the point the adoption agreement is finalized, the child must:

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- a. Meet the M-AF categorically needy eligibility criteria, if the income and resources of the adoptive parents are disregarded.
 - b. Live with the adoptive parent(s), unless temporarily absent.
3. Medicaid Application Procedures
- a. The Adoption Assistance worker must inform the adoptive family of their right to apply for Medicaid for the child when the adoption agreement is finalized.
 - b. The Adoption Assistance worker will provide form DSS-5095, Child Placement Information and Tracking System, (see sample at end of section) as verification that the child has special medical or rehabilitative needs which would be a barrier to adoption.

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- c. Field 18 of the DSS-5095 will indicate the initial period of the adoption agreement. Field 23 and 26 will indicate the funding source as "State" or "IV-B". Accept this as verification that the child has special medical needs and is not eligible for IV-E. The child's adoption records will contain verification of special needs status should it ever be questionable for a child adopted in North Carolina.
 - d. A signed application [DMA-5063](#), or [DMA-5063 \(Spanish\)](#), or DMA-5042 is required. The application may be signed by the adoptive parents, or a representative designated by the adoptive parents.
 - e. This is an administrative application.
 - f. Verification Requirements:
 - (1) Verify the child's assets and resources and compare to M-AF Categorically Needy income and reserve levels.
 - (2) The budget unit consists of the child only. Do not count the parent's income and resources.
 - (3) If countable income or resources exceed MAF-CN allowable limits, the child is ineligible as a "special needs" child. Evaluate eligibility under other Medicaid options including NCHC, counting parent(s) income and resources.
 - g. Verify if the potential for third party insurance from any source exists for the child. Report available insurance on form DMA-2041 when authorizing assistance.
4. Children Adopted Prior to 10/1/94 in North Carolina
- a. Children with special medical or rehabilitative needs who were adopted without Medicaid coverage, prior to 10/1/94, may qualify for coverage under this group when the child's records at the time of adoption indicated special medical or rehabilitative needs as defined in IV.A. Verification of special needs status for these children must come from the Adoption Assistance Worker in the county social services department via form DSS-5095.
 - b. An application for Medicaid must be filed by the adoptive parents or a representative designated by the adoptive parents. This is not an administrative application.
 - c. In order to be eligible as an adopted child with special needs, the child must meet financial eligibility criteria defined in [IV.B.2](#). In determining eligibility, use current Categorically Needy income and resource levels, not those in effect at the time of adoption.

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5. Authorization

- a. Key the DSS-8125 screen, authorizing Medicaid under M-AF once the adoption agreement is finalized.

- (1) Medicaid classification is "N."
- (2) Certification Period is six months.
- (3) If eligible, retroactive coverage may be authorized for up to three months prior to the date of application.
- (4) If the child was previously authorized for Medicaid in another category, terminate the coverage and authorize as M-AF the month following the month of termination.

b. Confidentiality

Due to confidentiality requirements associated with adoption procedures, the worker must follow procedures in [MA-3355 VI](#). (Enumeration Procedures), for Children in Foster Care or Adoptive Placement for enumeration of the adopted child.

- (1) If the child has previously received Medicaid in the birth name the worker must, upon finalized adoption, establish a new EIS case record using the child's adoptive name. This requires a new case I.D. number as well as a new individual I.D. number.
- (2) When the child's new social security number is received, complete a Name Change screen. Refer to [MA-3355, Enumeration Procedures, VI](#).

6. Redetermination

Once the adopted child has been determined eligible on the basis of special needs, he or she remains financially eligible for Medicaid as long as adoption assistance remains in effect. Do not react to change in the child's income or resources.

- a. Verify the following by contact with the adoptive parents and adoption assistance worker at each six-month review:
- (1) That the adoption agreement has not been terminated.
 - (2) Changes in third party insurance.

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- b. A signed DMA-5044 (redetermination document) is not required.
- c. Authorize the child as M-AF with a six-month certification period.

7. Terminations

Adoption assistance will terminate when the child reaches age 18 or leaves the home. It may also be voluntarily terminated by the adoptive parents. At this point, the child is no longer eligible on the basis of special needs.

- a. Evaluate, by completing an [ex parte review](#), ongoing Medicaid eligibility under another program prior to terminating assistance unless the parents have specifically requested termination in writing of Medicaid coverage.
- b. Once coverage under this group is terminated, parental financial responsibility applies if the child remains in the home with the parents (i.e. child turns 18). Count the adoptive parent's income and resources when determining eligibility for ongoing Medicaid coverage.
- c. Continuous Eligibility does not apply beyond age 18.

8. Children Receiving SSI

Individuals in North Carolina who receive SSI are automatically authorized for Medicaid. If the SSI recipient is a child who is pending adoption, the child's SSI may be terminated once the child is placed with the adoptive family, as SSI does not disregard parental financial responsibility. Take the following actions:

- a. Follow instructions in [MA-3120](#) to complete a Medicaid Redetermination ("Ex Parte").
- b. Verify the child's special needs status and financial eligibility by evaluating the following at the point the adoption agreement is finalized:
 - (1) Meet the M-AF categorically needy eligibility criteria, if the income and resources of the adoptive parents are disregarded.
 - (2) Live with the adoptive parent(s), unless temporarily absent.
- c. If the child is eligible under special needs criteria, authorize as M-AF. Enter a DSS-8124 screen. Key the DSS-8125 screen to authorize a six-month certification period.

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C. Adoptive Children With Special Needs Living In States Other Than Where They Were Adopted

1. General

Interstate Compact on Adoption and Medical Assistance (ICAMA) is an agreement by which states have the option to provide "special needs" adoption assistance for children entering their state from another ICAMA state. States have the option to participate; therefore, some special needs adoptive children entering or leaving North Carolina may not qualify under this agreement.

County eligibility and adoption workers are encouraged to work together to coordinate services for the special needs adoptive family. ICAMA is administered through the State Division of Social Services.

2. Adoptive Children From Other ICAMA States Living in N.C.

A child with special needs who is a resident of North Carolina and is the subject of an adoption assistance agreement with another ICAMA state shall be accepted as being entitled to receive Medicaid from N.C. provided all eligibility criteria outlined below are met.

a. Special Needs Status

- (1) Child must be under 18 years of age.
- (2) The eligibility worker should check with the adoption worker to verify if the adoption state is an ICAMA. The State Division of Social Services will keep a current copy of participating states.

If the child is not from an ICAMA state he cannot be evaluated as a "special needs" adoptive child. Evaluate eligibility for all other programs with adoptive parent(s) financial responsibility.

- (3) A child or his adoptive parent(s) must provide a certified copy of the adoption agreement from the adoption state that verifies special needs adoption assistance.
- (4) If the document is not provided, the worker should work with the foster care or adoptive worker in the county to assist the adoptive family in obtaining this information.

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b. Financial Eligibility Criteria

The child must:

- (1) Meet the M-AF categorically needy eligibility criteria, if the income and resources of the adoptive parent(s) are disregarded, and
- (2) Live with the adoptive parent(s), unless temporarily absent.

c. Medicaid Application Procedures

- (1) A signed application [DMA-5063](#), or [DMA-5063 \(Spanish\)](#), or DMA-5042 is required. The application may be signed by the adoptive parent(s), or a representative.
- (2) This is an administrative application.
- (3) Verification Requirements:
 - (a) Verify the child's income and resources and compare to M-AF Categorically Needy income and resource levels.
 - (b) The budget unit consists of the child only. Do not count the parent(s) income or resources.
 - (c) The child is ineligible as a "special needs" child if his countable income or resources exceed the allowable limits. Evaluate eligibility under all other programs including NCHC, counting financial responsibility of the adoptive parent(s).
 - (d) Verify if the potential for third party insurance from any source exists for the child. Report available insurance on the [DMA-2041](#).

d. Authorization

Follow the same procedures in place for N.C. Special Needs Adoption Assistance as outlined in [B.5.](#) to authorize benefits.

e. Redetermination

Follow the same procedures in place for N.C. Special Needs Adoption Assistance outlined in [B.6.](#)

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f. Termination

Follow the same procedures as outlined in [B.7.](#)

g. SSI

Follow the same procedures as outlined in [B.8.](#)

D. N.C. Special Needs Adoption Assistance Child Moving To Another State

1. Moves to Another ICAMA State

a. Upon notification that a special needs adoption child moved to another state the income maintenance worker should:

- (1) Send proper notice that assistance will terminate. Refer to [MA-3430](#), Notice and Hearings Process, to see if timely notice required.
- (2) Notify the adoption assistance worker of the change and any available information about the new state of residence.

b. The adoption worker will work with the "Compact Administrator" through the state DSS office to complete the necessary ICAMA forms needed to notify the ICAMA state. (See E.)

2. Moves to a non-ICAMA State

a. Upon notification that a special needs adoption child moved to a non- ICAMA state, the income maintenance worker should notify the adoption assistance worker of the change and any available information about the new state of residence.

b. The adoption worker will work with the "Compact Administrator" through the state DSS office to complete necessary ICAMA forms.

E. ICAMA Forms

Sample ICAMA forms are at the end of this section. See Attachments II, III, and IV. These ICAMA forms will be used primarily by the adoption assistance worker or the county designated person and coordinated through the state DSS office with the "Compact Administrator".

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V. POLICY RULES - TITLE IV-E INDIVIDUAL UNDER AGE 18, IAS**A. Living in North Carolina**

A child living in North Carolina who has a Title IV-E adoption assistance agreement or who receives Title IV-E foster care payments is eligible for Medicaid without a separate determination of eligibility if the child is:

1. Title IV-E with North Carolina, or
2. Title IV-E from another state and under age 18, which is the Title IV-E age limit in NC.

B. Living in Another State

A child receiving Title IV-E funds from NC but who lives in foster care or adoptive placement in another state is not eligible for Medicaid coverage from NC. He is eligible for Medicaid in the other state. Refer to V.E.

C. Procedures For North Carolina Title IV-E Child Living In North Carolina

1. Title IV-E Status

Verify Title IV-E status of the child with the agency adoption/foster care social worker.

2. Medicaid Application and Authorization

- a. A separate determination of eligibility for ongoing Medicaid is not required. Verification of current Title IV-E status is verification of eligibility for Medicaid.
- b. At the time the Title IV-E status is verified and ongoing Medicaid is authorized, the IMC must evaluate the retroactive period to determine whether there is medical need and eligibility requirements are met. Refer to MA-3305, M-AF, M-IC, H-SF Budgeting, for procedures.
- c. A signed DSS-5120, Eligibility Documentation/Verification for Foster Care, is required. Complete the following portions of the DSS-5120 and have the parent/representative sign.
 - (1) Page 1, top half. The only verification required is enumeration;
 - (2) Part 1, A (enter verification of Title IV-E status), J, K, and L;

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- (3) Part III, D, bottom portion and complete the following: Medicaid Status, Certification Period, Classification, and Signature lines.
- d. Enter a DSS-8124 screen and DSS-8125 screen in EIS, authorizing Medicaid under the I-AS aid program/category for Title IV-E child once verification of Title IV-E status is received. For reporting purposes, complete the case level special use field on the DSS-8125 as follows:
 - (1) Enter the "AS" code for the adoption assistance child or the "FC" for the foster care child and the standard postal abbreviation for the state responsible for the child's placement, i.e., AS NY or FC SC.
 - (2) For a foster care child only, enter the "IF"(in foster care) code and the beginning date of Medicaid authorization on a separate DSS-8125.
- e. Certification/Authorization for Medicaid for a Title IV-E child will be:
 - (1) Twelve months for an adoption assistance child,
 - (2) Six months for a foster care child.

D. Another State's IV-E Children Living In North Carolina

- 1. Children living in North Carolina for whom a IV-E adoption assistance agreement is in effect with another state or who are receiving IV-E foster care payments from another state are eligible for Medicaid coverage by North Carolina. The effective date of eligibility is the latest of:
 - a. The effective date of IV-E adoption assistance agreement/IV-E foster care payment, or
 - b. The month following termination of Medicaid by the other state.
- 2. Medicaid Applications and Authorization:
 - a. Follow procedures outlined in [V.C.2.a-d.](#)

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b. Verification of Title IV-E Status

(1) Title IV-E Adoption Assistance Child

Acceptable verification is a copy of the current Adoption Assistance Agreement which has been signed by the adoptive parent(s) and the agency administering the Title IV-E Adoption Assistance program, usually a county department of social services. This agreement states the child's eligibility for Title IV-E Adoption Assistance in the adoption assistance state. The agreement is in effect once signed until the adoption is terminated under one of the terms of the adoption agreement.

(a) The adoptive parent(s) should have a copy of the current agreement that will verify Title IV-E status.

1) If the parent(s) cannot provide a copy of the agreement, it will be the parent(s)' responsibility to provide the name and address of the Title IV-E Adoption Assistance Agency in the state responsible for administering the Title IV-E program.

a) The IMC should ask to see the adoption assistance check or Medicaid identification card, or

b) The parent(s) may be able to provide the name of the placement social worker.

2) It will be the IMC's responsibility to request a copy of the agreement from the other state once the adoptive parent(s) provide the agency's name and address. Refer to [Figure 2](#) for a sample letter.

(b) In lieu of a copy of the IV-E Adoption Assistance agreement, a written statement on agency letterhead from the IV-E assistance state verifying that a child is currently eligible for IV-E Adoption Assistance in their state is acceptable verification of IV-E status to receive Medicaid from North Carolina.

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(V.D.2.b.)

(2) IV-E Foster Care Children

A written statement on agency letterhead from the IV-E assistance state that a child is currently eligible for IV-E Foster Care Assistance in their state is acceptable verification of IV-E status to receive Medicaid from North Carolina. The statement must include the time period for which IV-E foster care eligibility has been determined by the other state.

In order to receive Medicaid from North Carolina, current proof of IV-E foster care eligibility must be reverified with the IV-E assistance state every six months. The worker can use the letter format in [Figure 2](#) to request IV-E eligibility directly from the other state. Verify current IV-E status with the local dss foster care worker.

If verification cannot be obtained from the local foster care worker, it will be the parent's responsibility to provide the name and address of the IV-E Foster Care Agency (see the foster care check or Medicaid ID card) in the other state that is responsible for administering the IV-E program. It will be the worker's responsibility to request verification of the child's current IV-E foster care status. See [Figure 2](#), for a sample letter the county can use.

- c. When a IV-E child loses IV-E status in the other state, terminate Medicaid based on timely notice requirements. Inform the parents that it is their responsibility to immediately inform the county of any change in the child's IV-E status.
- d. When a IV-E child who was placed in N.C. by another state (or one who moved here with his adoptive parents) moves out of North Carolina, terminate Medicaid. Inform the parent(s) that it is their responsibility to immediately inform the county if they plan to leave N.C. Give timely notice of termination.
- e. Inform the IV-E assistance state of the effective date Medicaid is being provided by North Carolina once the application is approved. See [Figure 3](#), for a sample letter the county can use.

E. North Carolina IV-E Children Living In Other States

- 1. Children approved for IV-E adoption assistance/foster care payments from N.C.:
 - a. Inform adoptive parents/caretaker of child that he must apply for Medicaid coverage in the county of the state in which the child is a resident.
 - b. Send [Figure 1](#) to the residence state.

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(V.E.)

2. IV-E eligible child moves out-of-state:
 - a. Do not establish a IV-E case in EIS. Terminate Medicaid if a Medicaid case exists.
 - b. Inform the adoptive parents or foster care provider that he must apply for Medicaid benefits for the child in the state in which he is currently living. As long as the child remains eligible for IV-E adoption assistance or foster care assistance from North Carolina, the child is eligible to receive Medicaid from his state of residence without a separate determination of Medicaid eligibility.
 - c. Provide the family with a current IV-E verification statement on agency letterhead that they can provide to their residence state as proof of the child's IV-E status in North Carolina when they apply for Medicaid benefits. Use the verification letter provided in [Figure 1](#) and provide the other state with proof of the child's continuing IV-E eligibility at each IV-E redetermination.
3. Child lives in another state and ceases to be IV-E eligible in North Carolina:
 - a. Provide written verification to the residence state that the child is no longer IV-E eligible in North Carolina so they can terminate IV-E Medicaid benefits to the child.
 - b. The child may be eligible for Medicaid benefits from North Carolina as a non IV-E eligible child (HSF or MAF). Evaluate potential Medicaid eligibility. If the child is Medicaid eligible in North Carolina, inquire with the resident state to determine if that state has opted to provide Medicaid coverage to non IV-E eligible foster children. If the resident state has not included this option in their state Medicaid plan, North Carolina must continue to provide Medicaid if eligibility requirements are met.

VI. POLICY RULES - FOSTER CHILD UNDER AGE 21, H-SF**A. To be eligible in the H-SF aid program/category an individual must:**

1. Be under 21 years of age.
2. Be a citizen of the United States or an alien who meets alienage requirements. Refer to [MA-3330](#), Citizen/Alien Requirement.
3. Be a resident of North Carolina as defined in [MA-3335](#), State Residence.
4. Not have resources for reserve in excess of the applicable allowance for the budget unit. Refer to [MA-3320](#), Resources.

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5. Meets income criteria:
 - a. For private living budgeting, refer to [MA-3305](#), M-AF, M-IC, H-SF Budgeting.
 - b. For long-term care budgeting, refer to [MA-3325](#), Long-Term Care Budgeting.
6. Not be receiving Medicaid from another aid/program category, county, or state.
7. Not be an inmate of a public institution, except individuals receiving psychiatric care in the state's mental hospitals
8. Provide verification of all health insurance coverage for himself and assign to the State all rights to third party payments from such insurance coverage. Refer to [MA-3510](#), Third Party Recovery (TPR).
9. Furnish his Social Security number, or apply for a number if he does not already have one, and furnish all Social Security numbers which he has used or under which he has received benefits. Refer to [MA-3355](#), Enumeration Procedures.

NOTE: A child in adoptive placement must furnish only SSN's he has had in his adoptive name. Once a birth certificate in the adoptive name is available, the child must be enumerated. Refer to [MA-3355](#), Enumeration Procedures.

10. Apply for all benefits to which he may be entitled (For example: UIB, Disability, SS, etc.). Refer to [MA-3300](#), Income.
11. Be ineligible for Title IV-E foster care assistance, and also meet one of the following:
 - a. The county department of social services (dss) has legal custody as a result of a court order and is placed in any setting, licensed or unlicensed, including foster care facility/home, other private home, or a long-term care facility, or
 - b. The county dss has placement responsibility.
 - (1) The county dss has placement responsibility when:
 - (a) The parent(s), other relative, or legal guardian has delegated caretaking responsibility to the county dss by written agreement for the child(ren) living separate and apart from them, or
 - (b) The child(ren) age 16 or older has expressed, through a written agreement with the county dss, a need for care and has agreed to a foster care arrangement, or

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- (c) A court order is issued which directs the county dss to care for and supervise the child(ren) outside of his own home even if legal custody is not transferred to the county dss.
- (2) When the county dss has placement responsibility instead of custody, placement may be in any of these settings:
 - (a) Foster care facility supervised by a county dss and licensed by DHR,
 - (b) A private child-caring institution licensed/approved by DHR and in compliance with Title IV of the Civil Rights Act,
 - (c) A private group home licensed/approved by DHR and which is in compliance with Title IV of the Civil Rights Act, or
 - (d) A medical institution as defined in [MA 3325](#), Long Term Care Budgeting, I.A.

B. County Placement Responsibility/Custody - H-SF

1. A signed and dated [DSS-5120](#) for Medicaid under the H-SF aid program/category is required.
 - a. The application should be made so that coverage can begin the month the county assumes custody/placement. The date of application is the date the [DSS-5120](#) is signed by the county director or his designee.

NOTE: Back-dating a Medicaid application in order to cover prior months is prohibited. See [C.2.](#) for guidance on retroactive coverage.
 - b. The Medicaid application for H-SF must be processed by an IMC. It must be signed by the director's designee but cannot be signed by the same caseworker who is determining eligibility for Medicaid.
 - c. The director's designee must provide the IMC with all information pertinent to the child's eligibility for Medicaid or must assist in obtaining necessary information.
 - d. Only the income and resources of the child are considered in determining financial eligibility under H-SF.
 - e. A child applying under H-SF must be evaluated for the M-IC aid program/category if he does not meet the financial criteria (excess reserve or deductible) for H-SF.

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2. There may or may not be a State Foster Home Fund payment for this child. Refer to the Family Services Manual, Chapter IV, Foster Care Services, Section 1202, for information on eligibility for State Foster Home Fund payments.
3. The county dss must make application for coverage under the appropriate aid program/category for any retroactive months, applying parental financial responsibility if the child was in the home of his parent(s) or temporarily absent. See [MA-3330](#), Retroactive Coverage.
 - a. Retroactive coverage is limited to the 1, 2, or 3 months immediately preceding the month of application.
 - b. There must be medical need in the retroactive period.
4. Unless there is good cause, a child under H-SF must be referred to Child Support Enforcement. Refer to [MA-3365](#), Child Support, for instructions.

C. Procedures

1. Document:
 - a. The child's legal status with regard to custody/placement.
 - b. All contacts made to verify custody or placement responsibility:
 - (1) Obtain a copy of the court order granting custody/placement responsibility or a copy of the written agreement from the parent(s) delegating placement responsibility to the county dss, and
 - (2) File in the income maintenance case record.
2. Eligibility Determination
 - a. Determine financial responsibility and verification requirements according to [MA-3305](#), M-AF, M-IC, and H-SF Budgeting.
 - b. Cease parental financial responsibility beginning with the month the county dss takes custody or assumes placement responsibility. Refer to [MA-3305](#), M-AF, M-IC, and H-SF Budgeting.

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- c. Determine whether the child has income, including child support, and/or assets of his own. Income received by the child or assets he owns are countable in determining his eligibility.
- d. Determine financial eligibility. Refer to [MA-3300](#), Income; [MA-3305](#), M-AF, M-IC, and H-SF Budgeting; and [MA-3320](#), Resources, for procedures.

- (1) Evaluate for H-SF.

He is eligible under the H-SF aid program/category if:

- (a) His assets are within the Categorically Needy (CN) limit, and
- (b) He has no income, or
- (c) His income is equal to or less than the CN income limit for one.

- (2) Evaluate as M-IC if income and/or assets exceed the CN level.

- (3) Evaluate for H-SF MN with a deductible if income exceeds the M-IC income limit and assets are within the MN allowance.

3. Return Home

- a. Sometimes a child can be placed in his parent(s)' home but remains the responsibility of the county dss and is supervised by the county agency. He continues to be H-SF.
- b. The child remains in the custody of the dss until his parent(s) is once again granted legal custody by the court.
- c. When it is determined that the stay is no longer temporary, that is, legal custody is given back to the parent(s), evaluate eligibility under another aid program/category, applying parental financial responsibility.

VII. COVERAGE OF CHILDREN IN ADOPTION AGENCIES AND CHILD CARING FACILITIES FOR WHOM THE COUNTY DOES NOT HAVE ANY RESPONSIBILITY

A. Apply These Procedures Only For The Children Who Are In:

- 1. The legal custody of a private, non-profit adoption agency.
- 2. The care of a private, non-profit child caring facility.
- 3. A publicly operated group home.

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B. General Guidelines

1. Private, Non-profit Adoption Agencies

- a. Children in the legal custody of a private, non-profit adoption agency may receive Medicaid under the M-AF or M-IC aid program/category prior to adoptive placement if they meet the regulations in [I.](#) (MAF) or [II.](#) (MIC).

NOTE: A mother cannot sign the release for adoption form until after the baby's birth.

- (1) The county of residence for the adoptive child will be the county in which the private adoption agency that has custody of the child is located. Once adoptive placement is made, residence will cease to be the county in which the adoption agency is located.
 - (2) It is the responsibility of the adoption agency to immediately notify the dss once adoptive placement is made. Send the DSS-8110 giving timely notice, and terminate the child's Medicaid.
 - (3) There are nine private, non-profit adoption agencies in North Carolina. Refer to [Figure 4](#) for these adoption agencies.
- b. If an adoptive child needs Medicaid during the adoptive placement period, the prospective adoptive parents must apply for Medicaid for the child under M-AF or M-IC regulations. Parental financial responsibility for adoptive parents does not apply during the placement period.
 - (1) If there is a question about the child's age or name, refer to [MA-3345](#), Age. However, do not request the child's original birth certificate because his name will no longer be correct.
 - (2) When the final order of adoption is granted, evaluate the child's continued eligibility for Medicaid based on parent for child financial responsibility.

2. Private Non-Profit Child Caring Facilities:

The county dss children's services section has a current listing of all licensed private, non-profit child caring facilities in North Carolina. These facilities include children's homes and small group homes. There are also licensed private foster family homes under these facilities. The private facilities can confirm whether the foster family homes are licensed. The county dss can also verify the status of these facilities by contacting the Division of Social Services Foster Care Office at (919) 733-4319.

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(VII.B.2.)

The county dss can verify whether a non-licensed child caring facility has private, non-profit status by contacting the Secretary of State, Corporations Office, at (919) 733-4201 between 12:00 p.m. and 6:00 p.m. and giving the exact name of the facility.

- a. The caseworker/representative with the private, non-profit child caring facility must certify in writing the expected duration of placement.
 - (1) If the statement indicates the placement is expected to be 12 months or less, parental responsibility applies. Evaluate the child under M-AF or M-IC regulations
 - (2) If the statement indicates placement is expected to exceed 12 months, parental financial responsibility does not apply. Evaluate the child under M-AF or M-IC regulations.
- b. If the facility has legal custody of the child (generally the facilities do not have custody), evaluate the child under M-AF or M-IC regulations in I. or II

C. Instructions For Authorization

1. Follow application regulations and procedures in [MA-3200](#), General Rules and Intake Reception.
 - a. Complete DSS-8124.
 - b. Classification is Categorically or Medically Needy and the aid program/category is M-AF or M-IC.
2. Complete the DSS-8125 and follow the usual certification/authorization procedures in [MA-3425](#), Certification and Authorization.

VIII. POLICY RULES – INDIVIDUAL UNDER AGE 18 WITH PROTECTED MEDICAID STATUS

Children under age 18 who have protected Medicaid status must be authorized for MAD-N if they meet the eligibility requirements for MAD-N. Protected status children may be authorized for Family & Children's Medicaid coverage groups only if they are ineligible for MAD-N.

Refer to the regulations for protected status children in the *Aged, Blind and Disabled Medicaid Manual*, Section MA-2525, Disability.